

# **Kentucky Continuous Monitoring Process (KCMP) Self-Assessment Instruction Manual**

Indicator 11	Indicator 12
Indicator 13	Indicator 15

## **2008-2009 Reporting Year**

*KCMP Quarter 2  
August – October 2009*

Kentucky Department of Education  
Division of Exceptional Children Services



Version 2.1

**August 1, 2009**

## Table of Contents

<b><u>General Information</u></b>	Changes to the Kentucky Continuous Monitoring Process (KCMP)	Page 2
	General Overview	Page 3
	Considerations for Developing High Quality Activities	Page 7
	KCMP Calendar of Events	Page 10
	Definitions	Page 14
	Acronyms	Page 17
	Indicators-At-A-Glance	Page 18
	Technical Instructions	Page 20
<b><u>Indicator Guidance</u></b>	Indicator 11 – Evaluation Timelines	Page 22
	Indicator 12 – Transition from Part C to Part B	Page 25
	Indicator 13 – Secondary Transition Requirements	Page 27
	Indicator 15 – Correction of Noncompliance	Page 31
	KDE Data Verification Process	Page 34
	District Determinations and Sanctions	Page 35
<p><i>Please read all instructions carefully to ensure the KCMP Self-Assessment is fully and accurately completed by the district.</i></p>		

## Changes to Kentucky Continuous Monitoring Process

DECS has been committed each year to making the KCMP more user friendly and to better facilitate the state's work around our Annual Performance Report (APR). There are still certain factors that have remained a challenge to both districts and the Department in collecting, analyzing and reporting on these data:

- The due date of November 15 for the submission of district-generated data has been burdensome on districts especially, with the closely timed requirements for the Maintenance of Fiscal Effort and December 1 Child Count reports
- The close turnaround time for DECS staff in using the KCMP reports as a source for the APR due in February of each year
- The fact that much of the district data used by the district is often a year or more old before the district is asked to review, analyze, determine cause and develop improvement plans is problematic
- Districts, coops and DECS were forced to focus on different indicators at different times

In order to address these issues, beginning this spring, the KCMP will be submitted on a quarterly basis as follows:

Time Frame	APR/KCMP Indicators to be Addressed
Quarter 1 (April 1 – June 30)	5, *6, 9 and 10
July	NA
Quarter 2 (August 1 – October 30)	11, 12, 13 and 15
Quarter 3 (November 1 – January 30)	1, 2, 4 and 20
Quarter 4 (February 1 – March 30)	3 and 8 (8 will be new)

A smaller version of the KCMP document will be sent to Directors of Special Education at the beginning of each quarter. Refer to the KCMP Calendar of Events beginning on page 10 for a detailed explanation of the new KCMP cycles.

## General Overview

The Kentucky Department of Education (KDE) implements its general supervision responsibilities through a variety of methods including, but not limited to, implementation of statute and regulations, policies and procedures, on-site and off-site monitoring, data collection and analysis, dispute resolution procedures (i.e. Mediation, Formal Complaints and Due Process Hearings), technical assistance activities, interagency agreements or Memorandums of Understanding (MOUs) and by the dissemination of promising practices through the Special Education Cooperatives or other mechanisms available to the state. Kentucky's General Supervision system can be likened to the pieces of a puzzle in that there are many components that fit together to form a complete picture of general supervision as represented by the graphic below:



In addition, Kentucky continues to implement its six year State Performance Plan (SPP) as required by IDEA. The state's progress on the twenty SPP indicators is reported annually to the U.S. Department of Education's Office of Special Education Programs (OSEP) through the Annual Performance Report (APR).

## Introduction to Kentucky Continuous Monitoring Process

This model of general supervision stands in contrast to the traditional view that "monitoring" activities consist merely of district on-site visits by KDE or by the districts' submission of and KDE's review of the Kentucky Continuous Monitoring Process (KCMP) data and documents

While it is not the function or purpose of the KCMP to be the state's primary mechanism for general supervision, the KCMP is an important component of Kentucky's general supervision system designed to promote continuous, equitable educational improvement for students with disabilities while ensuring they receive a free appropriate public education (FAPE). LEAs continuously collect data in a standardized, consistent manner for self-improvement to ensure appropriate implementation of IDEA requirements. Where possible, data available to the state are supplied to the LEA. These data are to be used to examine trends over time and provide additional information for program planning and to achieve and maintain compliance with federal and state IDEA requirements. LEAs have the flexibility to use existing committee structures such as Comprehensive District Improvement Planning Teams or other previously formed committees for self-assessment and improvement planning as set forth in the KCMP.

The KCMP indicators have been intentionally designed to support Kentucky and the LEAs in efforts to reach and maintain state targets as set forth in the SPP.

## KCMP Process Steps

### Step 1: Create a District Review Team (DRT)

The district uses an existing committee structure such as the Comprehensive School or District Improvement Planning Committee or creates a district-wide District Review Team. DRT membership is documented on each quarterly KCMP document and must consist of:

- parents of students with disabilities
- general education teachers
- special education teachers
- building and district level administrators

At least one parent on the DRT must not be employed by the district. Others, such as community members or representatives from institutions of higher education should be encouraged to participate as well. The DRT membership may be fluid from quarter to quarter, depending on the expertise and interests of designated DRT members. For example, preschool teachers and the parent of a preschooler might be on a team when preschool indicators are addressed, and middle and high school teachers might participate on the DRT with the parent of an older student when secondary transition issues are addressed. It is recommended that at least some district personnel remain on the team throughout the cycle to promote consistency in focus and activities from quarter to quarter.

### Step 2: Review Data

The district should consider developing a calendar of events with information related to the analysis of data for each KCMP indicator with assigned dates and timelines for discussing progress of each improvement or maintenance activity.

With the possible exception of discipline data, all quantifiable data on the KCMP will be provided on the KCMP Self-Assessment document from data the district has previously submitted to KDE (e.g., child count data, assessment data, etc). These data are displayed in tan fields in the KCMP Self-Assessment document. Any data required to be entered by the district will appear in light green fields.

All data provided to the district from KDE (i.e., Child Count, End of Year Report, assessment data etc.) should be validated by the district. Any discrepancies or errors in data should immediately be reported to Windy Newton ([Windy.Newton@education.ky.gov](mailto:Windy.Newton@education.ky.gov)).

In order to yield accurate information, student records must be selected randomly. Random means that records are not preselected. For example, selecting the record of every third, fifth, tenth, (etc.) student from the child count roster is one means of random selection.

Random also means that records are selected from a variety of schools, teachers, case managers, and categories of disability.

**Selection of records:**

- Random review is one way for the district to ensure accuracy. If the district is chosen by DECS for a data verification visit, there is a far greater likelihood that DECS' record review will match the results of the district's review, if the district has randomly selected its records. If the district has "hand-picked" the records it reviewed, and DECS discovers inaccuracies during a data verification visit, the district will be cited for a violation of the "timely and accurate" data requirement.
- At least 10% of the district's child count must be selected for the review, in order for the review to be valid. No more than 50 records are required to be reviewed.
- If the district has 10 or fewer records under the specific record review item, then all student records for that item must be reviewed. For example, if the district had 8 students referred to its preschool program from First Steps, all 8 records must be reviewed.
- Please note that, for Indicator 13 (record review item #49), at least 10% of records of students age 16 and older are selected.
- For Indicator 11 (record review item #54), at least 10% of records of students who were initially evaluated and had eligibility determined during the reporting school year are selected. Random selection of student records for Item #54 includes all students evaluated during the current year, and is not limited to the district's roster of special education students.

**Step 3: Analyze Data**

The DRT analyzes the data and where possible, compares the data to previous years to look for trends of district performance in terms of improvement or compliance. The team then should determine for each indicator the reason(s) why the data do or do not demonstrate improvement or compliance. This analysis of data is critical to ensure that the district's plan for improvement or maintenance is developed in a manner that will ensure that the activities conducted will have a direct and positive impact on each indicator.

A set of Investigative Questions are included for each indicator throughout this document.

**Step 4: Determine Causes for the District's Performance**

Based upon the analysis of district data as described above, the district should identify possible or probable root causes for the district's level of performance or compliance using the Investigative Questions provided for each indicator as a basis for making this decision:

**Step 5: Develop Improvement Plan**

Improvement planning should not be a "laundry list" of all activities a district may do in a particular area, but should focus on those activities that will directly impact the district's performance in each area. For the compliance indicators, a corrective action plan (CAP) designed to correct any area(s) of noncompliance within one calendar year must be included. This plan should be documented in the "Activities" section of the KCMP Monitoring Document.

Based on the causes determined by the DRT, identify between one and three activities that will likely have the greatest positive impact.

- Has a successful intervention/activity been implemented that needs to be continued?
- How can the district address issues of climate, culture, and history?
- What intervention strategies are being used or planned by the district already?
- How might the district bring about improved performance?
- What would yield the most immediate results or changes?
- What are the key factors the district can control that facilitate performance and compliance (e.g., policies, professional development/training, guidelines, dissemination of positive practices, monitoring)?
- How might the district evaluate the validity of the hypotheses formulated?
- How might the district evaluate the results of the interventions?

Based on periodic reviews and analysis, districts should revise the activities in the plan, as necessary. LEAs review new data evaluating trends over time and make programmatic changes that are data driven.

### **Step 6: Submit the Report**

The completed KCMP report is submitted to the local cooperative director via electronic mail by the end of the second month of that particular KCMP quarter (e.g., May 31, September 30, December 30 and March 31).

The district KCMP reports will be housed at the special education cooperatives. The coops will submit quarterly reports of regional data to DECS.

### **Step 7: Implement the Plan**

The district is responsible for implementing the improvement activities as written. Special Education Cooperatives are available to offer technical assistance as needed.

### **Step 8: Review and Evaluate Plan**

The district reviews and analyzes the activities in the plan periodically for effectiveness and to ensure correction of district-identified noncompliance in a timely manner.

### **Step 9: Cycle Continues**

The KCMP is a continual process of data collection, analysis and improvement planning. Districts review new data evaluating trends over time and make programmatic changes that are data driven.

## **Considerations for Developing Quality Improvement Plan\***

The intent of this section is to provide a means by which improvement activities can be assessed using a “quality” scale. This guidance *should not be* considered as any type of “formal” assessment – rather it is simply a tool developed to stimulate thinking and discussion among district personnel responsible for developing or implementing improvement activities. Quality descriptions used for this scale represent a formalization of basic “Who”, “What”, “Where”, “How” and “When” concepts, along with other considerations related to development of improvement activities that are clearly and effectively developed. This scale is intended to *broadly* assess quality of improvement activities, since there can be multiple activities listed.

## Overall Rating of Improvement Activities



No Revisions Needed



Some Revisions Needed

























Extensive Revisions Needed



Start Over...?

\*This information was adapted from the SPP/APR Improvement Activity Review Form developed by the North Central Regional Resource Center (NCRRC). The North Central Regional Resource Center is supported through cooperative agreement #H326R040005 with the U.S. Department of Education, Office of Special Education Programs. The content contained herein do not necessarily reflect the policy or position of the U.S. Department of Education and no official endorsement should be inferred. There are no copyright restrictions on the SPP/APR Improvement Activity Review Form. However, please cite the source when copying or citing all or part of this material.

As indicated in the chart below, quality of improvement activities is assessed on a continuous dimension – from *High Quality* to *Low Quality*. As a general or “global” assessment of improvement activities under each indicator, the rating categories represented by various icons ranging from *No Revisions Needed* to *Start Over...?* can be used to assess overall quality.

	<p> <b>High Quality Activities...</b></p> <p>The “cause-effect” relationship between the activity and the goal is clear – you know how the goal will be impacted as a result of implementing the activity.</p>		<p> <b>Low Quality Activities...</b></p> <p>There is little or no indication that if the activity was implemented, the goal will be impacted in any meaningful way. The activity may be considered “good”, but bears little relationship to the intent of the goal.</p>
<b>Improvement activities reflect district priorities...</b>	It is clear where the district is dedicating human and other resources. One understands what improvement activities the district deems most important and will receive the most attention.	   	Improvement activities are presented as a “laundry list” – one is unable to discern what should be done first or will be most likely to produce a desired outcome in relation to addressing the goal.
<b>Improvement activities are actionable...</b>	Improvement activities include “action steps” detailing what needs to happen when implemented. Action steps can be either expressed or implied, but it is clear that a series of events must occur in order to successfully implement the improvement activity.	   	Improvement activities are merely statements of vague intent. Frequently, “buzz words” and jargon give the impression that something will be accomplished (e.g., “ <i>Our agency will collaborate with X to strengthen and enhance cooperative relationships and resource sharing initiatives.</i> ”), but actually reveal little in the way of actions that will be taken.
<b>Improvement activities include measures of performance...</b>	A metric, benchmark, or target is included in the improvement activities. One is able to judge progress quantitatively (percentage, base rate, etc.)	   	No numbers or measures of progress of any type are included in the improvement activity. One is uncertain to what extent the improvement activity will contribute toward addressing the goal.
<b>Improvement activities are realistic...</b>	Improvement activities are “doable.” It is apparent the improvement activities can—and will—be implemented.	   	Even though each individual improvement activity is “doable,” there are too many listed. It is clear that the district has neither the resources nor the capacity to support all of the improvement activities it has generated for the goals.
<b>Improvement activities include timelines...</b>	A timeline of when the activity will be implemented is stated or implied.	   	No timeline is implied. Vague terms, like “ongoing” and “in the future” are used in place of a timeline.



<b>Improvement activities include technical assistance needs...</b>	A specific reference is made about the nature and intensity of technical assistance that will be needed to implement the activity.	☺ ☹ ☹ ✎	A reference is made to a technical assistance provider, but it is unclear what the assistance will entail. A technical assistance center is mentioned, but with no explanation of outcomes/activities.
<b>Improvement activities identify responsibility for implementation...</b>	One knows “who to go to” to discuss overall progress of the implemented improvement activity.	☺ ☹ ☹ ✎	No individual can be identified for taking responsibility for knowing about the improvement activity. A “group” may be referred to, but no connection can be made with a leader or responsible entity, e.g., “everyone” in the group is responsible, hence no one is responsible.
<b>Improvement Activities reflect innovation...</b>	It is clearly apparent that improvement activities were specifically designed to address the goal. One gets the impression of “fresh” and “new” perspectives are being considered to address the goal. The district is willing to take a “risk” because strategies used in the past have not produced positive results.	☺ ☹ ☹ ✎	The same improvement activities appear year after year, even though there is little evidence they have “worked” in the past. The same improvement activities are used for multiple goals with little or no consideration of alignment, etc.



## KCMP Calendar of Events

KCMP Quarter 1	April 1 – June 30, 2009
KCMP/APR Indicators	5, 9 and 10
Data Source	Indicators 5, 9 and 10 - December 2008 Child Count Data
Timeline and Process Steps for Districts	<ul style="list-style-type: none"> <li>• <b>April 1, 2009</b> – Pre-populated KCMP document and training materials are distributed to districts by KDE.</li> <li>• Districts verify and validate data. Report any inconsistencies or errors to Windy Newton (<a href="mailto:Windy.Newton@education.ky.gov">Windy.Newton@education.ky.gov</a>) with copy to coop director no later than <b>April 30, 2009</b>.</li> <li>• <b>May</b> - District assembles District Review Team (DRT) to: <b>Analyze Data, Determine Root Causes, Prioritize Root Causes and Develop Improvement Activities</b> as outlined in General Overview Section of KCMP Instruction Manual.</li> <li>• <b>May 30, 2009</b> – Districts submit completed KCMP document to Special Education Cooperative. The KCMP document remains on file at the coop.</li> <li>• <b>June 30, 2009</b> – Districts with identified Disproportionate Representation <b>submit DSAS survey to DECS</b> and with copy emailed to coop director.</li> </ul> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><i>In cases where a due date falls on a holiday or weekend, the due date will become the first business day after the established timeline.</i></p> </div>
Timeline and Process Steps for Cooperatives	<ul style="list-style-type: none"> <li>• <b>April - June</b> - Special Education Cooperatives <b>Compile District Level Data, Review District KCMP</b> submissions, <b>Conduct Data Analysis</b> at the regional and state coop levels, <b>Determine Root Causes and Develop Prioritized Regional Activities</b>.</li> <li>• <b>June 30, 2009</b> – Coops submit Regional Report to DECS.</li> </ul>
Timeline and Process Steps for Division of Exceptional Children Services (DECS) <i>(Protocols to be developed.)</i>	<ul style="list-style-type: none"> <li>• Based on review of Regional Reports and district DSAS documents <b>identify list of districts to receive desk audits and on-site visits by July 15, 2009</b>.</li> <li>• <b>July 15, 2009</b> – Notify districts that are receiving desk audit verifications and require districts to submit student rosters to DECS no later than <b>July 30, 2009</b>.</li> <li>• Begin <b>desk audit reviews</b> on <b>August 1, 2009</b>.</li> <li>• <b>Notify districts of findings and issue citations</b> for Indicators 9 and 10 no later than <b>August 30, 2009</b>.</li> <li>• Within 30 business days, <b>districts submit CAP</b> to DECS for approval.</li> <li>• <b>August - September 2009</b> – Notify districts receiving on-site visits exactly 2 weeks prior to the visit date.</li> <li>• <b>Conduct onsite visits</b> by core monitoring team. Team will have</li> </ul>

	<p>dedicated time upon return to the office to finalize report and prepare for division director's review.</p> <ul style="list-style-type: none"> <li>On or before <b>September 30, 2009</b> – Issue written Report of Findings via email to districts.</li> <li>No later than <b>November 11, 2009</b> – Corrective action plans (CAPs) are submitted to DECS for approval.</li> </ul> <p><i>Note: This is 30 business days following the district's receipt of the monitoring report as specified in 707 KAR 1:380, Section 2.</i></p>
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KCMP Quarter 2	August – October 2009
KCMP/APR Indicators	11, 12, 13 and 15
Data Source	<p>Indicators 11 and 13 – District Generated Record Reviews</p> <p>Indicator 12 – Preschool Performance Report</p> <p>Indicator 15 – DECS Monitoring Data</p>
Timeline and Process Steps for Districts	<ul style="list-style-type: none"> <li><b>August 1, 2009</b> – KCMP monitoring Document (pre-populated for Indicators 12 and 15), Indicator 11 and 13 Data Report and training materials are distributed to districts by KDE.</li> <li>Districts verify and validate data (for Indicators 12 and 15). Report any inconsistencies or errors to Windy Newton (<a href="mailto:Windy.Newton@education.ky.gov">Windy.Newton@education.ky.gov</a>) with copy to coop director no later than <b>August 30, 2009</b>.</li> <li><b>By August 15, 2009</b> – Districts complete and submit Indicator 11 and 13 Data Report to regional coop director.</li> <li><b>Prior to September coop meeting</b> - District assembles District Review Team (DRT) to: <b>Analyze Data, Determine Root Causes, Prioritize Root Causes and Develop Improvement Activities.</b></li> <li><b>September 30, 2009</b> – District submits completed KCMP document to Special Education Cooperative.</li> </ul> <p><i>Note: In cases where a due date falls on a holiday or weekend, the due date will become the first business day after the established due date.</i></p>
Timeline and Process Steps for Cooperatives	<ul style="list-style-type: none"> <li><b>August - October</b> - Special Education Cooperatives <b>Review</b> district <b>KCMP Submissions, Compile District Level Data, Conduct Data Analysis</b> at the regional and state coop levels, <b>Determine Root Causes and Develop Prioritized Regional Activities.</b></li> <li><b>October 30, 2009</b> – Coops submit Regional Report to DECS.</li> </ul>
Timeline and Process Steps for Division of Exceptional Children Services (DECS)	<ul style="list-style-type: none"> <li>Based on review of Regional Reports <b>identify</b> list of <b>districts to receive desk audits and on-site visits</b> by <b>November 15, 2009</b>.</li> <li><b>January 2, 2010</b> – Notify districts that are receiving desk audit verifications and request student rosters (specifying which student</li> </ul>

(Protocols to be developed.)	<p>records were used for KCMP purposes).</p> <ul style="list-style-type: none"> <li>Require <b>districts</b> to <b>submit student records (including those used for KCMP)</b> to DECS no later than <b>January 20, 2010</b>.</li> <li>Begin <b>desk audit reviews</b> no later than <b>February 2, 2010</b>.</li> <li><b>Notify districts of findings and issue citations</b> for Indicators 11, 12 and 13 no later than <b>February 28, 2010</b>.</li> <li><b>March - April 2010</b> – <b>Notify districts receiving on-site visits</b> exactly 2 weeks prior to the visit date.</li> <li><b>Conduct onsite visits</b> by core monitoring team. Team will have dedicated time upon return to office to finalize reports and prepare for division director's review.</li> <li>On or before <b>April 30, 2009</b> – <b>Issue written Report of Findings via email</b> to districts.</li> <li>No later than <b>June 10, 2009</b> – <b>Corrective action plans (CAPs)</b> are <b>submitted</b> to DECS for approval.</li> </ul> <p><i>Note: This is 30 business days following the district's receipt of monitoring report as specified in 707 KAR 1:380, Section 2.</i></p>
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KCMP Quarter 3	November 1, 2009 – January 30, 2010
KCMP/APR Indicators	1, 2, 4 and 20
Data Source	Indicators 1, 2 and 4 – Section 618 Data (End of Year Report) Indicator 20 – DECS records of timely and accurate submissions
Timeline and Process Steps for Districts	<ul style="list-style-type: none"> <li><b>November 1, 2009</b> – Pre-populated <b>KCMP document and training materials</b> are <b>distributed to districts</b> by KDE.</li> <li>Districts verify and validate data. Report any inconsistencies or errors to Windy Newton (<a href="mailto:Windy.Newton@education.ky.gov">Windy.Newton@education.ky.gov</a>) with copy to coop director no later than <b>November 30, 2009</b>.</li> <li><b>December</b> - District assembles District Review Team (DRT) to: <b>Analyze Data, Determine Root Causes, Prioritize Root Causes and Develop Improvement Activities.</b></li> <li><b>January 15, 2009</b> – Districts submit completed KCMP document to Special Education Cooperative.</li> </ul> <p><i>In cases where a due date falls on a holiday or weekend, the due date will become the first business day after the established timeline.</i></p>
Timeline and Process Steps for Cooperatives	<ul style="list-style-type: none"> <li><b>November - January</b> - Special Education Cooperatives <b>Compile District Level Data, Conduct Data Analysis</b> at the regional and state coop levels, <b>Determine Root Causes and Develop Prioritized Regional Activities.</b></li> </ul>

	<ul style="list-style-type: none"> <li><b>February 15, 2010</b> – Coops submit Regional Report to DECS.</li> </ul>
Timeline and Process Steps for Division of Exceptional Children Services (DECS) <i>(Protocols to be developed.)</i>	<ul style="list-style-type: none"> <li>DECS will <b>determine</b> any <b>need for onsite visits</b> relative to these indicators by <b>February 28, 2010</b>.</li> <li><b>March - April 2010</b> – <b>Notify districts receiving on-site visits</b> exactly 2 weeks prior to the visit date.</li> <li><b>Conduct visits</b> by core monitoring team. Team will have dedicated time upon return to office to finalize reports and prepare for division director's review.</li> <li>On or before <b>April 30, 2010</b> – <b>Issue written Report of Findings</b> via email</li> <li>No later than <b>June 10, 2010</b> – <b>Corrective action plans (CAPs)</b> are <b>submitted</b> to DECS for approval.</li> </ul> <p><i>Note: This is 30 business days following the district's receipt of monitoring report as specified in 707 KAR 1:380, Section 2.</i></p>

KCMP Quarter 4	February 1 – March 30, 2010
KCMP/APR Indicators	3 and 8
Data Source	Indicator 3 – Kentucky Performance Reports (KPR), NCLB Reports Indicator 8 – Parent Survey Data
Timeline and Process Steps for Districts	<ul style="list-style-type: none"> <li><b>February 1, 2010</b> – Pre-populated <b>KCMP document and training materials</b> are <b>distributed to districts</b> by KDE.</li> <li>Districts verify and validate errors. Report any inconsistencies or errors to Coop director by <b>February 15, 2010</b>. Coop directors report any needed corrections to KDE (Windy Newton).</li> <li>District assembles District Review Team (DRT) to: <b>Analyze Data, Determine Root Causes, Prioritize Root Causes and Develop Improvement Activities.</b></li> <li><b>February 28, 2010</b> – Districts submit completed KCMP document to Special Education Cooperative.</li> </ul>
Timeline and Process Steps for Cooperatives	<ul style="list-style-type: none"> <li><b>February - March</b> - Special Education Cooperatives <b>Compile District Level Data, Conduct Data Analysis</b> at the regional and state coop levels, <b>Determine Root Causes and Develop Prioritized Regional Activities.</b></li> <li><b>March 30, 2010</b> – Coops submit Regional Report to DECS.</li> </ul>
Timeline and Process Steps for Division of Exceptional Children Services (DECS) <i>(Protocols to be developed.)</i>	<ul style="list-style-type: none"> <li><b>April 2010</b> DECS will review regional and state data for Indicators 3 and 8, Conduct Root Cause Analysis to review/revise APR Improvement Activities</li> </ul>

## Definitions

1. *Admissions and Release Committee (ARC):* A group of individuals who are responsible for developing, reviewing, or revising an Individual Education Program (IEP) for a child with disabilities. The membership of this committee includes the parent(s), teacher(s) of general education, teacher(s) of special education, representative of the Local Education Agency (LEA) who is qualified to provide or supervise the provision of specially designed instruction, an individual who can interpret the evaluation results, related service provider(s), the child (if appropriate), and others as determined necessary.
2. *Annual Performance Report (APR):* A document submitted by the Kentucky Department of Education that reports annual progress toward meeting the state's twenty State Performance Plan goals. This report is submitted each February to OSEP.
3. *Compliance:* As defined in 707 KAR 1:002, means the obligations of state or federal requirements are met.
4. *Corrective Action Plan (CAP):* As defined in 707 KAR 1:002, means a written improvement plan describing activities and timelines, with persons responsible for implementation, developed to correct identified areas of non-compliance, including directives from the Kentucky Department of Education, specifying actions to fulfill a legal obligation.
5. *Determinations:* A decision made annually by the Office of Special Education Programs (OSEP) at the state level and by the Kentucky Department of Education for local districts after data relevant to the State Performance Plan (SPP) and Annual Performance Report (APR) indicators have been reviewed. States and local districts are assigned a determination of one of four categories: Meets Requirements, Needs Assistance, Needs Intervention and Needs Substantial Intervention. Sanctions must be invoked for any state or local district that does not Meet Requirements in a given year.
6. *District Review Team (DRT):* A Local Educational Agency (LEA) committee that includes parent(s) of children with disabilities (not employed by the district), teacher(s) of general education, teacher(s) of special education, administrators, and others as needed.
7. *Dropout:* As per End-of-Year Data Instructions, a special education student reported on the Exiting list who at some point during the 12-month reporting period was enrolled at the start of the reporting period, was not enrolled at the end of the reporting period, and did not exit special education through any of the other bases described. This includes dropouts, runaways, GED recipients who dropped out of school and then received their GED, students who were expelled, students whose status is unknown, students who moved and are not known to be continuing in another educational program, and other exiters from special education.
8. *Eligible Student:* A student evaluated in accordance with 707 KAR 1:300, as meeting the criteria for one or more of the 13 categories of disability, which has an adverse impact on the student's educational performance and who, as a result, needs special education and related services.



9. *Educational Environment:* The physical location where a student with a disability receives educational services in accordance with an IEP.
10. *Kentucky Continuous Monitoring Process (KCMP):* An ongoing self-evaluation process used by local school districts for data collection and analysis, program evaluation and improvement of a district's special education programs.
11. *Local Education Agency (LEA):* A public local board of education or other legally constituted public authority that has either administrative control or direction of public elementary or secondary schools in a district or other political subdivision in the Commonwealth. This includes the Kentucky School for the Blind (KSB) and the Kentucky School for the Deaf (KSD), as well as any agency that is charged by State statute with the responsibility of providing educational services to children with disabilities.
12. *Needs Assessment:* A continuous review and analysis of data by LEAs to determine specific district, school, parent and student needs.
13. *Parent:* means:
  - A biological or adoptive parent of a child
  - A guardian generally authorized to act as the child's parent, or authorized to make educational decisions for the child, but not the State if the child is a ward of the State
  - A person acting in the place of a biological or adoptive parent such as a grandparent, stepparent, or other relative with whom the child lives, or a person who is legally responsible for the child's welfare
  - A foster parent if the biological or adoptive parents' authority to make educational decisions on the child's behalf has been extinguished and the foster parent has an ongoing, long-term parental relationship with the child, is willing to make the educational decisions required of parents under 707 Chapter 1, and has no interest that would conflict with the interests of the child
  - A foster parent if the biological or adoptive parents grant authority in writing for the foster parent to make educational decisions on the child's behalf, and the foster parent is willing to make educational decisions required of parents under 707 Chapter 1, and has no interest that would conflict with the interests of the child
  - A surrogate parent who has been appointed in accordance with 707 KAR 1:340.
14. *Part B:* The section of the Individuals with Disabilities Education Act (IDEA) that funds educational services for children with disabilities ages three through twenty (3-20) and sets forth the legal obligations of LEAs under the act.
15. *Part C:* The section of the Individuals with Disabilities Education Act (IDEA) that funds early intervention services to infants and toddlers, from birth to three years old and sets forth the legal obligations for serving these students. In Kentucky, the agency responsible for implementation of Part C is First Steps.
16. *Sanctions:* Actions taken by the Kentucky Department of Education (KDE) in response to a LEA's failure to comply with requirements in IDEA as set forth in state and federal laws and administrative regulations related to the process for making Determinations and 707 KAR 1:380, Section 4.

Examples of sanctions may include technical assistance, consultation, assignment of a Special Education Mentor, redirection of or withholding of funds in part or in whole or more severe actions as needed.

17. *Section 618 Data:* Data required by OSEP from each state and district as required by Section 618 of the IDEA. This information is reported by the district to KDE annually on Tables 1 through 5 and are submitted either on the December 1 Child Count or End-of-Year Report. Additional Section 618 data collected by the state through other means include data on assessment, complaints and hearings.
18. *Stakeholders:* People who have a vital interest in programs for children with disabilities. This includes parents, both general and special education teachers, related services providers, and administrators. To the extent appropriate, students with disabilities, higher education representatives and community members should be a part of this group.
19. *State Performance Plan (SPP):* A six-year plan required by Congress that requires each state to collect data and set targets for twenty indicators established by OSEP. The KCMP is used to support the state in the achievement and/or maintenance of the state's performance on these targets. Progress on the State Performance Plan is tracked through an Annual Performance Report submitted to OSEP each February. The [State Performance Plan](#) is available on the KDE website.
20. *Target:* The expected level of performance as determined by the State Performance Plan.





## Acronyms

1.	APR	Annual Performance Report
2.	ARC	Admissions and Release Committee
3.	CAP	Corrective Action Plan
4.	CATS	Commonwealth Accountability Testing System
5.	CDIP	Comprehensive District Improvement Plan
6.	CSIP	Comprehensive School Improvement Plan
7.	CTBS	Comprehensive Test of Basic Skills
8.	DECS	Division of Exceptional Children Services
9.	DEIC	District Early Intervention Committee
10.	DRT	District Review Team
11.	DPP	Director of Pupil Personnel
12.	FAPE	Free Appropriate Public Education
13.	IDEA	Individuals with Disabilities Education Act
14.	IEP	Individual Education Program
15.	ILP/IGP	Individual Learning Plan/Individual Graduation Plan
16.	KAR	Kentucky Administrative Regulations
17.	KCMP	Kentucky Continuous Monitoring Process
18.	KDE	Kentucky Department of Education
19.	KECCAG	Kentucky's Early Childhood Continuous Assessment Guide
20.	KECTP	Kentucky Early Childhood Transition Project
21.	KISTS	Kentucky In-School Transition Survey
22.	KSB	Kentucky School for the Blind
23.	KSD	Kentucky School for the Deaf
24.	LEA	Local Education Agency
25.	LRE	Least Restrictive Environment
26.	NCLB	No Child Left Behind
27.	OSEP	Office of Special Education Programs (federal)
28.	SEA	State Education Agency
29.	SPP	State Performance Plan
30.	YOYO	Youth One-Year-Out Survey

## Indicators At-a-Glance

*Note: Indicators shaded in gray will not be reported by districts in the KCMP Monitoring Document at the present time.*

*Compliance indicators are italicized.*

Indicator 1	Percent of youth with IEPs graduating from high school with a regular diploma	Completed during November 1 – January 30 quarter
Indicator 2	Percent of youth with IEPs dropping out of high school	
Indicator 3a	Percent of districts meeting the State's AYP objectives for progress for disability subgroup	Completed during February 1 – March 30 quarter
Indicator 3b	Participation rate for children with IEPs	
Indicator 3c	Proficiency rate for children with IEPs	
Indicator 4a	Percent of districts identified by the State as having a significant discrepancy in the rates of suspensions and expulsions of children with disabilities for greater than 10 days in a school year	Completed during November 1 – January 30 quarter
Indicator 4b	Percent of districts identified by the State as having a significant discrepancy in the rates of suspensions and expulsions of greater than 10 days in a school year of children with disabilities by race and ethnicity	Report at later date.
Indicator 4c	Suspension rates for children with disabilities are comparable to the rates for non-disabled children within the district.	Completed during November 1 – January 30 quarter This indicator is not aligned with SPP requirements
Indicator 5	Percent of children with IEPs aged 6 through 21 A. Removed from regular class less than 21% of the day. B. Removed from regular class greater than 60% of the day; or C. Served in public or private separate schools, residential placements, or homebound or hospital placements	Completed during April 1- June 30 quarter
Indicator 6	Percent of preschool children with IEPs who receive special education and related services in settings with typically developing peers (i.e., early childhood settings, home, and part-time early childhood/part-time early childhood special education settings)	Added to April 1 – June 30 quarter, but not reported at this time
Indicator 7	Percent of preschool children with IEPs who demonstrate improved: A. Positive social-emotional skills (including social relationships); B. Acquisition and use of knowledge and skills (including early language/ communication and early literacy); and C. Use of appropriate behaviors to meet their needs	Report at later date

Indicator 8	Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities	Completed during February 1 – March 30 quarter
Indicator 9	<i>Percent of districts with disproportionate representation of racial and ethnic groups in special education and related services that is the result of inappropriate identification</i>	Completed during April 1 – June 30 quarter
Indicator 10	<i>Percent of districts with disproportionate representation of racial and ethnic groups in specific disability categories that is the result of inappropriate identification.</i>	
Indicator 11	<i>Percent of children with parental consent to evaluate, who were evaluated and eligibility determined within 60 days (or state established timelines)</i>	Completed during August 1 – October 30 quarter
Indicator 12	<i>Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays</i>	
Indicator 13	<i>Percent of youth aged 16 and above with an IEP that includes coordinated, measurable, annual IEP goals and transition services that will reasonably enable the student to meet the postsecondary goals</i>	
Indicator 14	Percent of youth who had IEPs, are no longer in secondary school and who have been competitively employed, enrolled in some type of postsecondary school, or both, within one year of leaving high school	Report at end of SPP cycle (January 30, 2013)
Indicator 15	<i>General supervision system (including monitoring, complaints and hearings.) corrects noncompliance as soon as possible but in no case later than one year from identification</i>	Completed during August 1 – October 30 quarter
Indicator 16	<i>Percent of signed written complaints with reports issued that were resolved within 60 day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint</i>	State general supervision responsibility
Indicator 17	<i>Percent of fully adjudicated due process hearing requests that were fully adjudicated within the 45 day timeline or a timeline that is properly extended by the hearing officer at the request of either party</i>	State general supervision responsibility
Indicator 18	<i>Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements</i>	State general supervision responsibility
Indicator 19	<i>Percent of mediations held that resulted in mediation agreements</i>	State general supervision responsibility
Indicator 20	State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.	Completed during November 1 – January 30 quarter  District reported data (Child Count, End-of-Year Exiting Table, KCMP Data, KCMP Monitoring Document, Maintenance of Fiscal Effort, Post-School Outcomes) are timely and accurate

## Technical Instructions

### 1. Save document in 2008-09 KCMP Folder

- The Director of Special Education will receive an email from KDE containing the district KCMP Monitoring Document. Open the email and drag the attached file to the 2008-09 KCMP folder onto the desktop. This folder was created during the previous KCMP quarter. If this was not done, you may do so now.
- Double click on the 2008-09 KCMP folder. Open the file you just placed there.

- e.g., Quarter 2 Kaysimp Co KCMP

Note: Unlike recent KCMP Monitoring Documents, the Quarter 2 KCMP Document is in Word format.

### 2. Open KCMP Monitoring Document

- Check to make sure that the district name and number appear on the first page. If not, type them in the provided spots.
- It will be necessary to scroll down to access the entire document.

If it is not possible to see the entire page, the window is probably too small. To adjust this window, click on the Maximize button in the top right corner of the window. (The maximize button is the square in between the – and the x.)

- Data can only be entered in light gray fields.
- Calculations will be automatically completed and will appear in the salmon fields.
- Use the tab key to move from gray field to gray field.
- Click on the Save button (the one at the top that looks like a floppy disk) or click “File” and then “Save” often to save your work.
- See “Important Note” below to ensure all of your response is visible to KDE viewers.

### 4. **Printing the document**

- Print the document using the Print button on the menu page at this time to use for group discussion, planning and note taking.

## 5. Entering information in the document

- Begin by entering the dates of the DRT team meetings on the second page. Tab from field to field to enter team members and their titles.
- Since this word document does not have the functionality to do calculations built in, a separate Excel document will be supplied to the district to allow for this to be done. Use the numbers and calculations in the Excel sheet to enter into the appropriate fields in the Monitoring Document. Percentages must be entered as decimals in the Word document. For example to enter 100% into the document, you would enter a “1” since 1 = 100%. For 90% enter .90; 85% enter .85 and so on.
- To enter responses in the data analysis, root causes, and improvement or activities sections for each indicator, click in the appropriate box below before typing. Do not hit “enter” to move from section to section.
- Throughout the rest of the document, enter the data analysis, causes for district performance and activities for improvement or maintenance for each indicator.
- Save this work frequently

## 6. Submit the Document

Attach the KCMP Monitoring Document in an email and send to your local special education cooperative director. KCMP Monitoring Documents are no longer submitted directly to KDE.

### Summary of Changes

- The KCMP Monitoring Document is now in Word format instead of Excel.
- Do not use the enter key to move from field to field. Either use the tab button or click directly in the field where you wish to type.
- Fields where large amounts of text are typically entered (e.g., data analysis, explanation of root causes, activities etc.) are expandable fields and will display all text entered.
- District input data must be entered in decimal form rather than percentages. The decimals will automatically convert to percentages in the display.
  - To input 100% - Type “1” in the field.
  - To input 90% - Type .90
  - To input 85% - Type .85, etc.

## Instructions for KCMP Indicator 11

**Indicator 11:** Percent of children with parental consent to evaluate, who were evaluated within 60 school days

### **Compliance Indicator**

**08-09 State Targets:** 100%

**07-08 Actual Target Data:** 94.87%

#### **Measurement:**

- a. # of children for whom parental consent to evaluate was received.
- b. # determined not eligible whose evaluations were completed within 60 days (or State established timeline).
- c. # determined eligible whose evaluations were completed within 60 days (or State established timeline).
- d. # determined eligible in more than 60 days where parent repeatedly failed or refused to produce the child for an evaluation session.
- e. # transfer students where the parent and district mutually agreed in writing to extend the timeline to a specified date.

Account for children in a but not included in b or c. Indicate the range of days beyond the timeline when the evaluation was completed and any reasons for the delays.

Percent = [(b + c + d + e) divided by (a) times 100].

**Data Source:** District Generated Record Reviews (item #54) via Indicator 11 and 13 Data Report

**Data Collection Schedule:** Submitted to regional cooperatives on August 15, 2009

#### **Indicator 11 Information:**

- Tracking system data used to generate Indicator 11 should be verified by the district before being reported to special education cooperative on Indicator 11 and 13 Data Report.
- Districts should make every possible effort to begin and conclude the evaluation process early enough within the 60 school day timeframe to allow the district more flexibility in being able to make multiple attempts (more than 2) to invite the parent to attend or participate by alternate means in the eligibility determination ARC. If the district does this and the parent cannot or will not attend the ARC may be held, eligibility determined and an IEP written in order to meet the 60 school day requirement. The IEP cannot be implemented until parental consent is obtained.
- The 60 school day timeline does not apply if the parent of a child repeatedly fails or

refuses to produce the child for the evaluation. However, the district should maintain documentation of those dates when the parent did not produce the child to the evaluation setting.

- In the case where a student who began the evaluation process in another district moves into the district, the district is ultimately responsible for meeting the timeline. However, in cases where the parent agrees in writing, the timeline may be extended for up to 60 school days (by a specified date) to allow the district time to complete the evaluation and determine eligibility.
- The 60 school day timeline does **not** supersede the requirement for preschoolers transitioning from Part C to have an IEP in place by their third birthday as specified in Indicator 12.

### Investigative Questions - Indicator 11:

#### General Questions:

- Has the district met the state APR target this year?
- Has there been progress or slippage since the last report?
- What have the trends been in the past four years?
- Where is it going well and where is it not going well?
- What is common to schools where it is going well and not so well?
- What patterns are there? (Use Indicator specific investigative questions)
- Are there patterns with:
  - schools
  - teachers (teacher pre-service, in-service, other professional development)
  - school levels, i.e., primary versus secondary
  - parent involvement at the school level
  - degree of co-op involvement
  - staffing (administrator changes, central office changes, teacher retirement)

#### Regarding Compliance:

- In cases where the district failed to meet the 60 school day timeline, have all affected students since had their evaluations completed and eligibility determined even if it is beyond timelines?
  - Are evaluations begun and completed early enough, so the district may give timely notice of the eligibility meeting to the parents, and allow adequate time to reschedule the meeting if needed, for the parents to attend?
    - If multiple attempts are made and the district has provided alternate dates or methods of participation and the parent cannot or does not attend/participate, does the ARC meet and make an eligibility decision and develop an IEP within the 60 school day timeline?
- Note: The IEP cannot be implemented until the parent gives consent for services.*
- Does the district verify the evaluation tracking system data with due process folder reviews to ensure accuracy?
  - If the use of contractual services is the cause of noncompliance, are safeguards included within the contract to ensure the evaluation is conducted in a timely manner?

**Regarding the Evaluation Process:**

- Is responsibility for the evaluation process assumed by the entire staff or just the school psychologist(s)?
- Is there an evaluation tracking system? What does this look like?
- Are there specific components of the evaluation that consistently hold up or delay the evaluation process? Has the district taken systemic steps to address the issue?
- Is there a process outlining specific due dates for each evaluation component to ensure the entire process (including determination of eligibility) is completed within 60 school days?

**Potential Resources for completing KCMP Reporting Instrument:**

- Infinite Campus
- [Kentucky's Annual Performance Report](#) (April 2009 revision), Indicator 11 beginning on page 50



## Instructions for KCMP Indicator 12

**Indicator 12:** Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthdays.

### **Compliance Indicator**

**07-08 State Performance Rate:** 96.56%

**08-09 State Target:** 100%

#### **Measurement:**

- a. # of children who have been served in Part C and referred to Part B for eligibility determination
- b. # of those referred determined to be not eligible and whose eligibilities were determined prior to their third birthdays.
- c. # of those found eligible who have an IEP developed and implemented by their third birthdays.
- d. # of children for whom parent refused to provide consent caused delays in evaluation or initial services.

Indicate the range of days beyond the third birthday when eligibility was determined and the IEP developed and the reasons for delay.

Percent=[(c) divided by (a-b-d) times 100.

**Data Source:** 2008-2009 Preschool Performance Report

**Data Collection Schedule:** Submitted to Division of Early Childhood Development, Preschool Education Branch by June 30, 2009

#### **Indicator 12 Information:**

- The 60 school day timeline described in Indicator 11 does not supersede the requirement that an IEP be developed by the 3<sup>rd</sup> birthday for children transitioning from Part C to Part B.

## Investigative Questions – Indicator 12

### General Questions:

- Has the district met the state APR goal?
- Has there been progress or slippage since the last report?
- What have been the trends for the past four years?
- Where is it going well and where is it not going well?
- What patterns are there? (Use Indicator specific investigative questions)
- Are there patterns with:
  - Schools
  - Teachers
  - School levels
  - Parent involvement
  - Degree of co-op/RTC involvement
  - Staffing
- Are there any relationships when data are disaggregated?

### Regarding Compliance:

- If the district has met the state target, what policies, practices and/or procedures contribute to this success?
- If the district has not met the state target, what policies, practices and/or procedures interfere with the district's efforts to meet the target?
- How does the district ensure that transition data is valid and reliable?
- What resources has the district used to support their efforts to meet the state target?

### Regarding the Transition Process:

- How does the district participate in a collaborative, interagency process with First Steps representatives? How does the district regularly communicate with First Steps?
- How does the district use the identifying information provided by KDE to assist in the tracking of students who may be transitioning to preschool?
- Based on a review of child records, including those where the IEP is not developed by the child's third birthday:
  - How many days following referral was parental consent obtained for evaluation?
  - How many days from parent consent until the evaluation completed?
  - How many days from completion of the evaluation was eligibility determined?
  - How many days from eligibility was the IEP completed?
  - What percent of the delays are related to parents not providing consent for the evaluation?
  - What percent of the delays are related to not completing evaluations in a timely manner? What are the reasons for those delays?
- What does the feedback from transition items on parent surveys indicate?

### Potential Resources for completing KCMP Reporting Instrument:

- [Kentucky's Annual Performance Report](#) (April 2009 revision), Indicator 12 beginning on page 52
- [Transition One Stop](#)

## Instructions for KCMP Indicator 13

**Indicator 13:** (Applicable only to programs serving youth age 16 and older) Percent of youth aged 16 and above with an IEP that includes coordinated, measurable, annual IEP goals and transition services that will reasonably enable the student to meet the postsecondary goals:

### **Compliance Indicator**

**07-08 State Performance Rate:** 86.98%

**08-09 State Target:** 100%

#### **Measurement:**

# of youth with disabilities aged 16 and above with an IEP that includes coordinated,  
measurable, annual IEP goals and transition services that  
will reasonably enable the student to meet the post-secondary goals  
#of youth with an IEP age 16 and above

**Data Source:** District Generated Record Reviews (item # 49) via Indicator 11 and 13 Data Report

**Data Collection Schedule:** Submitted to regional cooperatives on August 15, 2009

#### **Indicator 13 Information:**

- Although data for Indicator 13 is due to the Regional Cooperatives by August 15, 2009, if the district is not at 100% compliance, updated data may be submitted with the district's final report to the cooperative on September 30, 2009.
- The Office of Special Education Programs (OSEP) has identified this indicator for collection of transition data for each state. Data on this indicator must be submitted to OSEP each February in the state's Annual Performance Report.
- The Division of Exceptional Children Services (DECS) has determined the items on which Kentucky school districts will collect data in order to answer this indicator for OSEP. The data are collected through the Kentucky Continuous Monitoring Process (KCMP). DECS used the OSEP approved "Indicator 13 Checklist" to align the KCMP Indicator 13 requirements:
  - a. The IEP contains appropriate measurable postsecondary goals based on age appropriate transition assessments related to (a) training or education, (b) employment, and, (c) as needed, independent living skills.
  - b. The IEP includes a statement of needed transition services of the child.
  - c. The identity of any other agency that is invited to send a representative, if appropriate.
  - d. If yes for item c, signed Consent for Release of Information is included.

- e. The child has a multi-year course of study as outlined in the Individual Learning (Graduation) Plan.
- f. Annual goal(s) included in the IEP will reasonably enable the child to meet the stated postsecondary goals.
- g. Measurable postsecondary goals are based on age appropriate transition assessment.
- Indicator 13 is a compliance indicator, which means the district is expected to be at 100%. If not, an improvement plan must be written to show how the district will get to 100%.

## Investigative Questions – Indicator 13

### General Questions:

- Has the district met the state APR target this year?
- Has there been progress or slippage since the last report?
- What have the trends been in the past four years?
- Where is it going well and where is it not going well?
- What is common to schools where it is going well and not so well?
- What patterns are there? (Use Indicator specific investigative questions)
- Are there patterns with:
  - schools
  - teachers (teacher pre-service, in-service, other professional development)
  - school levels, i.e., primary versus secondary
  - parent involvement at the school level
  - degree of co-op involvement
  - staffing (administrator changes, central office changes, teacher retirement)
- Are there any relationships when data are disaggregated?
  - age
  - race/ethnicity,
  - poverty,
  - gender,
  - disability

### Regarding Outcomes:

- If the district is (has been) compliant with Indicator 13; what impact has this had on graduation rate, dropout rate, and successful transition rate?
- How do ARCs use the interconnectedness among the necessary components of transition planning (Assessment – Present Levels – Postsecondary Goals – Transition Services – Annual Goals) to develop more effective transition IEPs?
- How do ARCs use student-focused transition planning to improve academic progress, suspension rate, graduation rate, dropout rate, positive post-school outcomes?
- How does the district ensure that training has occurred, including how concepts were job-embedded at the school level with appropriate follow-up provided?

**Regarding postsecondary goals (49a):**

- How do ARCs ensure that students' postsecondary goals cover each of the required areas?
- How can the district connect this IEP requirement with the individual Learning Plan?
- Is the schools' ILP process at full implementation with advised student input, making it a *tool to inform* the ARC rather than just a *task to complete* by the student?
- Do schools provide transition services that will assist students in reaching their postsecondary goals?

**Regarding statements of transition services (49b):**

- Do students' IEPs describe the transition services to be provided by the school, as well as transition services to be provided or paid for by outside agencies?
- Do transition services address the academic and functional needs of the student?
- Do transition services include (a) instruction, (b) related service, (c) community experience, (d) development of employment and other post-school adult living objectives, (e) if appropriate, acquisition of daily living skills, OR (f) if appropriate, provision of a functional vocational evaluation?

**Regarding coordination with other agencies (49c and 49d):**

- Do ARCs consider the individual needs (interests and preferences) of the student before deciding if and when to invite another agency to the transition planning meetings?
- Do ARCs consider representation from agencies/services such as postsecondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services and/or independent living or community participation?
- If agency representatives do not attend, how do ARCs obtain information from them or make the necessary linkages between student and agency?

**Regarding courses of study (49e):**

- How do ARCs use the student's 4-year course of study when developing the statement of transition needs and other descriptions of levels of performance?
- Do schools assist students in planning their courses of study in relationship to their individual postsecondary goals?
- Are ARCs utilizing official transcripts to inform course of study selections?
- Are ARCs utilizing parent and student transition surveys to inform course of study selections?

**Regarding annual goals (49f):**

- How do ARCs discuss how the annual goals might enable the student to reach postsecondary goals?
- How can the district connect this IEP requirement with the Individual Learning Plan?

- How do ARCs use knowledge about the student's transition needs to guide them in writing annual goals?

**Regarding transition assessment (49g):**

- What sources does the district use for assessing the students' transition needs?
- Do ARCs utilize assessment information from the student's Individual Learning Plan? Does ILP assessment information align with other transition information (surveys, etc.)?
- If the Individual Learning Plan does not provide enough information, do ARCs have other assessments to consider?
- Do students receive training and supervision on how to complete and use their ILP?

**Potential Resources for completing KCMP Reporting Instrument:**

- [Regional Interagency Transition Teams \(Contact Cooperatives\)](#)
- [KDE Dropout Prevention Branch](#)
- [Transition One Stop at the Human Development Institute at the University of Kentucky](#)
- [Kentucky Transition Signal Project](#)
- [National Dropout Prevention Center for Students with Disabilities](#)
- [National Center on Secondary Education and Transition](#)
- [Kentucky Postschool Outcomes Data Collection](#)
- [Kentucky's Annual Performance Report](#) (April 2009 revision), Indicator 13 beginning on page

## Instructions for KCMP Indicator 15

**Indicator 15:** Percent of noncompliances corrected no later than one year from identification.

### **Compliance Indicator**

**07-08 State Performance Rate:** To be reported in FFY 2008 APR due to OSEP on February 1, 2010

**08-09 State Target:** 100%

#### **Measurement:**

KCMP noncompliances are corrected within one year of identification and notification to the district. Relevant time period for correction of noncompliances is one year from May 8, 2008 (the date districts were notified in writing by KDE of their compliance status for Indicators 9, 10, 11, 12 and 13)

- a. # of KCMP noncompliances identified on May 8, 2008, to be corrected by May 8, 2009
- b. # of KCMP noncompliances identified in 2008 which were actually corrected by May 8, 2009

**Data Source:** DECS records on correction of noncompliance; individual student folders and Compliance Record Review forms

**Data Collection Schedule:** Collected throughout the year as districts are notified of noncompliance and the subsequent correction of that noncompliance

#### **Indicator 15 Information:**

- The SPP requires States to monitor the effectiveness of their systems of general supervision. SPP Indicator 15 measures whether the State ensures that district-level IDEA noncompliance are corrected as soon as possible, but no later than one year after the State notifies the district of the noncompliance.
- KCMP Indicator 15 requires similar data from districts in the area of correction of compliance indicators. In other words, have districts developed and implemented a system of general supervision that identifies and corrects KCMP noncompliance within one year?
- Indicator 15 data consist of KCMP noncompliances that were corrected by the district within one year of notification of the noncompliance.
- Note the number of noncompliances identified in the district's May 8, 2008 letter from DECS. The district must compare that number to the number of KCMP noncompliances which were corrected within one year, as specified in an email from DECS on May 8, 2009.
- Please note that for Indicator 15, correcting noncompliance within one year from identification means that the following must occur within one year:
  - The district corrects the noncompliance;
  - KDE verifies the correction; and,
- KDE notifies the district that the Corrective Action Plan has been closed

## Investigative Questions – Indicator 15

### General Questions:

- Did the district meet the state target by correcting all noncompliance within one year of identification?
- For each of the five compliance indicators (Indicators 9 through 13):
  - Has there been progress or slippage since the last report?
  - What have been the trends in the past four years?
  - Where is it going well and where is it not going well?

*Depending on the compliance indicator(s) being reviewed, the district may be able to disaggregate the data and answer the following questions:*

- Identify existing patterns for the following:
  - Schools - What is common to schools where it is going well and not so well?
  - If there are schools that have corrected their noncompliance, what activities have been successful at correcting the noncompliance? Can the activity be duplicated at the schools that are not compliant?
  - Teachers - What is the experience and training of the teacher in schools where it is going well and not so well? In cases where compliance is an issue, is the teacher temporarily or provisionally certified, emergency certified, or have a probationary certificate?
  - Professional development- Are there commonalities in teacher pre-service, in-service, or other professional development? Are staff entering the data appropriately trained?
  - School levels, i.e., primary versus secondary
  - Parent involvement at the school level
  - Degree of co-op involvement or involvement of other technical assistance providers
  - Staffing – Have there been administrator changes, central office changes, changes with data entry staff, or teacher retirement?
- Have DoSEs in the co-op region that have corrected their noncompliance for the specific indicator been consulted? To what do they attribute their district's success? Are there similarities between the two districts' situations?

### Regarding Policies, Procedures and Practices:

- Has the district reviewed its policies, procedures and practices?
- If the district's policies, procedures and practices are not in compliance with IDEA, or if they need additional detail to address the indicator noncompliance, have they been amended?
- Does the district have a policy and procedure or practice for correcting noncompliance within one year, including:
  - Is there an action plan in place for correction of noncompliance which lists the activity, who is responsible and the activity timeline?
  - Was the action plan implemented fully and correctly?



- Are staff designated to make sure the activities are completed?
- Is there a system in place to check progress on compliance indicator activities throughout the year?
- Are reviews of the action plan held with key staff throughout the year?

**Regarding Data:**

- Are data for the compliance indicators reviewed on an ongoing basis throughout the year?
- If noncompliance is found during the data review, is it immediately corrected?
- If the indicator noncompliance has not been corrected within a year, has the district reviewed the data and, if needed, revised the root cause analysis?
- Does the district have a process for ensuring that IDEA data are entered correctly?

**Regarding Professional Development:**

- Has professional development been provided that addresses both the specific noncompliant indicator and the requirement that the noncompliance be corrected within one year of identification?
- Have staff collecting the data received training on properly using the Compliance Record Review form? Do they use the Compliance Record Review Directions Document during the review process?
- Have staff received training regarding the connection between compliance indicators, the district's Determination and accompanying sanctions?
- Have staff entering the data received appropriate training?

**Regarding Administrative Issues:**

- Does the DoSE have the authority to require correction of the noncompliance? If not, will the superintendent assert his or her supervisory authority if needed, to ensure that the necessary corrections be made?

**Potential Resources for completing KCMP Reporting Instrument:**

- [Kentucky's Annual Performance Report](#), Indicator 15 beginning on page 66

## Kentucky Department of Education Data Verification Process

Based upon analysis of district level data available to the Kentucky Department of Education, including KCMP data, DECS will conduct a series of data verification visits to districts throughout the year. The focus of these visits will be to ensure that data provided from districts to the department are not only timely, but also **accurate** and **reliable**. Districts will be notified by the designated team leader two weeks before the actual date of the visit and districts will be given a brief overview of the visit at that time.

While onsite, DECS will:

- Review individual student records used in reporting compliance data and look at comparison folders not used for the KCMP for consistency
- Interview district personnel, including administrators and members of the DRT
- Interview parents and other non district employees who participate on the DRT
- Look for evidence that improvement activities are implemented
- Address any other unforeseen issues that may arise

Within 60 calendar days of the visit, DECS will issue a report to the district outlining the findings of the data verification team including any instances of noncompliance. There is a one year time frame from the date the report is issued until DECS must validate and report back to the district that all deficiencies have been corrected.

Within the one year time frame specified above, DECS follows the steps outlined in 707 KAR 1:280 Section 1:

- Prior to the development of a corrective action plan (CAP) the district will be provided an opportunity to submit additional information or to verify or clarify issues related to the report
- A CAP shall be submitted to KDE no later than 30 business days after the district receives the report of noncompliance
- The CAP must include:
  - A statement of the matter to be corrected
  - The steps the LEA shall take to correct the problem and document compliance
- Within 30 business days of receiving the CAP, KDE shall notify the district of the status of the CAP. The district shall have 30 business days to submit a new CAP.
- A CAP approved by KDE shall be monitored and shall be an official document requiring the district to meet the specified activities. The Kentucky Department of Education shall not initiate further sanctions during the time period specified in the CAP unless requested by the district.

## District Determinations and Sanctions

KDE is now required by federal regulation to make annual Determinations for all districts in the state relevant to the district's performance with IDEA requirements. Per 20 USC 1416(e) Enforcement, there are four levels of determination. Districts that "**Meet Requirements**" have met the legal obligations as set for that year's determinations as determined by OSEP. The other levels and accompanying sanctions are as follows:

- **NEEDS ASSISTANCE**.—If the KDE determines, for 2 consecutive years, that a district needs assistance, the KDE shall take 1 or more of the following actions:

  - "(A) Advise the district of available sources of technical assistance Such technical assistance may include—
  - "(i) **the provision of advice by experts**
  - "(ii) assistance in identifying and implementing professional development, instructional strategies, and methods of instruction that are based on scientifically based research;
  - "(iii) designating and using distinguished superintendents, principals, special education administrators, special education teachers, and other teachers to provide advice, technical assistance, and support; and
  - "(iv) devising additional approaches to providing technical assistance, such as collaborating with institutions of higher education, educational service agencies, national centers of technical assistance supported under part D, and private providers of scientifically based technical assistance.
  - "(B) **Direct the use of district-level funds** under section 611(e) on the area or areas in which the State needs assistance.
  - "(C) **Identify** the district **as a high-risk grantee and impose special conditions** on the district's grant under this part.
- **For "Needs' Intervention"** (3 or more consecutive years)

  - "(i) Require the district to prepare a corrective action plan or improvement plan if the KDE determines that the district should be able to correct the problem within 1 year.
  - "(ii) Require the district to enter into a compliance agreement under section 457 of the General Education Provisions Act, if the KDE has reason to believe that the district cannot correct the problem within 1 year.
  - "(iii) For each year of the determination, **withhold** not less than 20 percent and not more than 50 percent

of the district's **funds** under section 611(e), until the KDE determines the district has sufficiently addressed the areas in which the district needs intervention.

"(iv) Seek to recover funds under section 452 of the General Education Provisions Act.

"(v) **Withhold, in whole or in part, any further payments** to the district under this part pursuant to paragraph (5).

□ **For "substantial intervention"**

[the KDE] shall take 1 or more of the following actions:

"(A) **Recover funds** under section 452 of the General Education Provisions Act.

"(B) **Withhold, in whole or in part, any further payments** to the district under this part.

Previously Kentucky followed the provisions of 707 KAR 1:380 Sections 3 and 4 concerning the implementation of sanctions. However, since federal requirements supersede state regulation, the state must invoke the procedures as set forth above.

The KDE gives notice at least ten (10) school days prior to initiating actions related to sanctions. The KDE remains in contact with the LEA staff during the imposition of sanctions until the deficiencies are remedied.

